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FAX COVER SHEET

From: Neil R. Jetter

Date: August 7, 2006

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Fax Number: (571) 273-8300

Examiner: Parries, Dru M.
Serial No.: 10/677,596
Inventors: EISENSTADT
Docket No.: 5853-268

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Comments/Special Instructions

Enclosures:

- * Transmittal Form (1 page)
- * Fee Transmittal Form (1 page)
- * Three Month Extension of Time (1 page)
- * Reply to Office Action (20 pages)
- * This Fax Cover Sheet (1 page)

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{WP327367;1}

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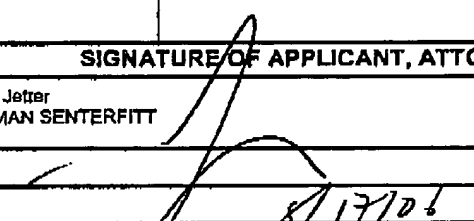
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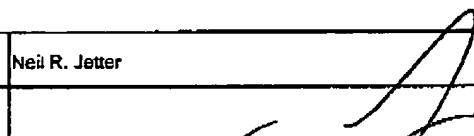
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/677,586
	Filing Date	October 2, 2003
	First Named Inventor	EISENSTADT
	Art Unit	2836
	Examiner Name	Parnes, Dru M.
Total Number of Pages in This Submission	Attorney Docket Number	5853-288

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
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<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	The Director is authorized to charge any fee deficiencies to Deposit Account No. 50-0951.	
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Date	8/17/06	

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2005☒ Applicant claims small entity status See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 510.00)

Complete if Known

Application Number	10/677,595
Filing Date	October 2, 2003
First Named Inventor	EISENSTADT
Examiner Name	Parnes, Dru M.
Art Unit	2836
Attorney Docket No.	5853-265

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 60-0951 Deposit Account Name: AKERMAN SENTERFITT

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	=				
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 or HP =	x	=				
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Fee for Petition for Three-Month Extension of Time (\$510.00)

\$510.00

SUBMITTED BY

Signature

Registration No. 46,803
(Attorney/Agent)

Telephone 561-653-5000

Name (Print/Type) Neil R. Jeter

Date 8/17/06

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